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HE SAW HIS OWN SURGERY

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The following story is an excerpt from a collection for a book I'm working on called Medicine and the Soul. This, and other selections that I'll share in future newsletters, follow my own journey of consciousness and how working with medical patients who've had out-of-body and near-death experiences has shaped my own path. I am grateful to the patients I've been privileged to work with and the stories they've entrusted to me for the benefit of a wider audience. While some details may have been altered to protect personal identities, the core of the story has been relayed as it happened.

Sitting at his bedside in the dull wards of the Veteran's Administration Hospital where I was doing a rotation as part of my medical residency training, I was listening to all the reasons why he did not want to have the surgery he needed to save his life. He was a sweet but frail African American veteran of the Korean conflict who had undergone a prior abdominal repair of shrapnel damage to his small bowel and was now once again facing the need of a procedure to release the adhesive scar tissue that was strangling his gut.

"I ain't never gonna have surgery again," he replied emphatically, "because the last time they did that I saw everything! I saw them open me up and cutting inside my belly. I tried to tell them I wasn't asleep, and they wouldn't listen to me!"

"Did you feel pain?" I asked, knowing that under general anesthesia he should not have been conscious for the procedure. I also knew there would have been a drape extending up from the sterile surgical field separating his upper body from the abdomen where they were working, preventing him from seeing what the surgeons were doing even if he had been aware.

"No, I didn't feel no pain," he said, "but I could see what they were doing when I looked down, and it freaked me out!" Reliving that moment, he was clearly distressed.

"I can only imagine how terrifying that must have been," I replied. I did my best to reassure him, but at the same time, I was intrigued. I was able to review his medical records from that surgery performed several years earlier, and there was no mention of anything physically unusual that had occurred during the procedure.

I specifically sought out the anaesthesiologist's records, knowing that that particular physician would have been positioned at the head of the patient during the surgery and would have been the first to recognize and respond to any signs of wakefulness or distress. According to his documentation, there were none.

The anesthesiologist's report laid out a typical intubation of the patient and connection to the ventilator once the patient was asleep. Throughout the surgery the vital signs were recorded in detail and there was no indication that he had experienced any distress while under anesthesia.

According to the physician's accounts of the case the procedure was routine, without complications of any sort. More specifically, he remained physically unconscious throughout the entire surgery! Following the trail of that hospital stay, I read that the patient recovered well and was eventually discharged home. Now he was back and facing a similar surgery that he flatly refused to undergo because he maintained that he had viewed the entire procedure from a vantage point above his physical body!

Despite pleas from his family that he have the surgery, he continued to refuse. After being deemed competent by the staff psychologist to make his own decisions, he said he would rather be made comfortable and let nature take its course than repeat the frightening ordeal he had perceived some years earlier.

Agreeing to respect his wishes, his family gathered at his bedside as he continued to decompensate and eventually, enveloped in a comfortable haze of morphine to suppress his pain, passed away from complications of an ischemic bowel.

I was an internal medicine resident at the time and had been offered nothing in my training to reference this interaction with my patient, so I was impotent to express to him that perhaps what he had experienced was an anomaly of consciousness separate from the physical body. At the time I was still assembling my own thoughts around such phenomena, so in the end I said nothing.

Now, some sixteen years later, I am more firmly established in medical practice and have been privy to many such patient experiences, including out-of-body moments during surgery,

trauma and coma, as well as the classic near-death experiences during confirmed cardiac death. I've become much more bold in inviting patients with similar stories to consider that there may be more to their existence than mere atoms and protoplasm. For many this is the first time they've considered that they may be more than their physical bodies.

There are numerous recorded incidents of disassociation of consciousness from the human body, but at the time that I was first introduced to the possibility by my patient at the Veteran's Hospital, I didn't know that. That was the first time in medical practice that I had encountered the phenomenon and I didn't know what to say.

I will always be grateful to him though because that experience changed me and firmly set my feet upon a path to confirm my growing suspicions that we are more than our physical matter. And without knowing it, he opened up the gift of dialogue between me and many other patients that would follow him about life, death and what survives.